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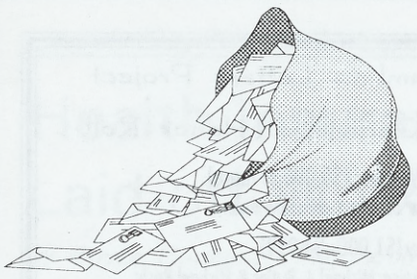

# Lambda Letters Project

32640

Vol. 10, No. 3 March, 2002 www.lambdaletters.org LambdaLP@aol.com (916) 728-1261

## An Historic Event

*by Boyce Hinman, Chief Lobbyist*

On February 28, an historic event occurred. On that date, in San Francisco, a woman had sex-reassignment surgery to change her male body into that of a woman. You might well ask, "What's so historic about that? Sex-reassignment surgery is not all that uncommon." That's true, but in this case the surgery was paid for by Medi-Cal. That hasn't happened since the 1970s. (The woman asks that we respect her privacy. So I will do nothing to identify her in this article. I will simply call her Jane.)

Since the 1970s, Medi-Cal has routinely refused to pay for sex-reassignment surgery. Jane needed to have the surgery and she was a Medi-Cal recipient. But Medi-Cal refused to pay for her surgery. So Jane went to Legal Services Corporation of Northern California and they took Medi-Cal to court. In January, 2001, Judge James T. Ford of Superior Court in Sacramento ruled that Medi-Cal did indeed have a policy of routinely denying coverage for the surgery and the related emotional and hormone therapy. He ordered Medi-Cal to abandon this policy.

Specifically Judge Ford ordered Medi-Cal to "...rescind its policy of denying Medi-Cal coverage to all medical services related to transsexualism, regardless of the medical necessity of the service." He also ordered Medi-Cal "to review any request for Medi-Cal coverage of a service or treatment related to transsexualism on a case-by-case basis." In essence, if a transsexual can make a case for the medical necessity of hormone therapy, emotional therapy, and sex-reassignment surgery, then Medi-Cal must pay for these services. Medi-Cal didn't appeal the court's decision. So now it is the law of the land in California.

By the way, Jane chooses not to call it "sex-reassignment" surgery. She says she is not transsexual. She is a woman. She was before the surgery and she is now after the surgery. Her body was a mistake. Thus the surgery was "sex-correction surgery." That may be a concept worth considering.

Other people on Medi-Cal who need medical services related to transsexualism may be having trouble getting Medi-Cal pay for those services. If so, they may want to contact the Legal Services Corp. office nearest their home for assistance. Legal Services Corp. is actually a national corporation with affiliated organizations throughout the country. These agencies are partially supported with U.S. government funds. Their mandate is to provide low-cost or free legal services to people on limited incomes. Medi-Cal recipients who need help in obtaining Medi-Cal payment for medical care related to transsexualism may contact one of the following affiliate agencies listed on page 13.

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## Lambda Letters Progress Report

**Messages Collected**

| | |
|---|---|
| January, 2002 | 24,687 letters & e-mails |
| In all of 2001 | 140,892 letters & e-mails |

**Dollars Spent**

| | |
|---|---|
| January, 2002 | $3,429 |
| In all of 2001 | $51,289 |

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# Lambda Letters Project

## Mission Statement

To promote people of color, feminist, lesbian, gay, bisexual, transgender, and HIV/AIDS status advocacy, and to bring people of color, women, lesbians, gays, bisexuals, transgendered and intersex persons, and persons affected by or living with HIV/AIDS into full participation in American society.

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*Lesbian/Gay/Bisexual/Transgender Issue*

# Health Insurance for Laid-off Workers

*by Boyce Hinman, Chief Lobbyist*

Please write to the members of the Assembly Revenue and Tax Committee in Support of AB 1885, introduced by Assemblymember Carol Liu (D–Pasadena).

Many people enjoy group health insurance through their place of work. In many cases, the employer pays part or all of the premium for this insurance. However, if the employee is laid off or has his or her hours reduced, the employer often stops paying the premium.

The Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA) requires most employers with group health plans to offer employees the opportunity to continue their group healthcare coverage under their employer's plan if their coverage otherwise would cease due to termination, layoff, or other change in employment status. This COBRA coverage can continue for up to 18 months. If the employee was fired for gross misconduct, he or she does not qualify for the COBRA coverage.

However, the (former) employee pays the premiums for COBRA coverage and those premiums can be expensive. Many individuals decide to go without coverage in order to save money. This risky consumer behavior automatically adds these individuals and families to the swelling ranks of California's uninsured.

On the other hand, a recent study by the National Bureau of Economic Research indicates that a tax credit ($1,000 per individual and $2,000 per family) will reduce the uninsured population by as much as 85 percent. Consumers would be more likely to purchase insurance with this added incentive.

*Continued on page 13*

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*HIV/AIDS Issue*

# Adequate Payments to Care Providers

*by Boyce Hinman, Chief Lobbyist*

This month we ask that you write to members of the Assembly Health Committee in support of AB 1853, introduced by Assemblymember Paul Koretz (D–West Hollywood). AB 1853 is a revised version of last year's AB 937, which was passed by the legislature but vetoed by Governor Davis. AB 1853 is a pared-down version of the earlier bill. Assemblymember Koretz hopes the new bill responds to the governor's concerns and that he will be willing to sign this bill.

But first we must get it approved by the Assembly Health Committee.

AB 1853 would require every healthcare service plan that covers hospital, medical, or surgical expenses, and contracts with providers on a capitated basis, to consider certain factors when determining reimbursement rates for providers who care for people with HIV.

What does that mean? The providers mentioned are the doctors and other specialists who care for people with HIV. Capitated rates are fixed payments or fees paid by healthcare service plans to doctors and other health professionals who care for people covered by the plan. Generally HMOs pay these fixed rates for each patient cared for.

AB 1853 says that, when setting a capitated rate for the care of people with HIV, the rates must meet certain standards. The gist of these standards is that the payment rates must adequately compensate the healthcare providers and must not be so low as to discourage them from treating patients with HIV.

In plain English, the purpose of the bill is to assure that caregivers will be paid enough to make it worth their while to serve people with HIV. Last year's AB 937 would have applied these same rules to Medi-Cal, which is run by the State of California. That would have increased the state's costs, which is why the governor objected to the bill.

Currently, doctors receive a monthly payment for each HMO patient they serve. The rate is the same whether the person never comes to the doctor or the person has expensive treatment needs. The general idea is that there are enough people who need few services

*Continued on page 13*

Women's Issue

# Abortion Rights for California Women

*by Adrienne Lauby*

Just last month, President George W. Bush nominated Judge Charles Pickering to the U.S. Court of Appeals, a man who has opposed legal abortion throughout his life. The Department of Justice filed with the Court of Appeals to uphold an Ohio law banning late-term abortions. Secretary of State Colin Powell supported condom use for health purposes on MTV and caused a right-wing furor. The Bush administration extended government-funded healthcare—via the States Children Health Insurance Program—to fetuses. In the U.S. House of Representatives, the Judiciary Subcommittee on the Constitution voted to criminalize any non-parental adult who helps a minor cross state lines to obtain an abortion. The Federal Drug Administration delayed approving over-the-counter distribution of the "morning after" emergency contraception pill. Internationally, the Army of God, a violent anti-abortion group, began threatening abortion providers in Britain.

With so many attacks, it's no wonder that California feminists are double-checking our state's abortion laws. Current California law, struck down as unconstitutional by the courts, harshly limits abortion. SB 1301, the Reproductive Privacy Act (Kuehl, D–LA), replaces that law and strengthens protections provided by *Roe v. Wade*. This bill affirms the individual possession of a right of privacy with respect to reproductive decisions, including the fundamental rights (a) to choose or refuse birth control and (b) to choose to bear a child or obtain an abortion. The bill also penalizes anyone providing abortions without the appropriate medical licenses.

Most women getting abortions have already had at least one child. Most abortions fall early or late in a woman's reproductive years—years that she is likely to find child-raising most difficult. Women without partners choose abortions more often than those who have love and support from a partner. Pregnancy and childbirth vastly affect that most personal of regions: a woman's body. The right to control reproduction is the single most important factor in equal rights for women today. Please join us in writing our legislators to support SB 1301.

*Statistics provided by the Centers for Disease Control.*

People of Color Issue

# Healthcare for LEPs

*by Marty Martinez*

Title VI of the Civil Rights Act of 1964 prohibits exclusion from participation in, denial of benefits of, and discrimination under federally assisted programs on ground of race, color, or national origin in programs and activities receiving federal financial assistance. This is the law as it is stated broadly. Federal departments and agencies have since issued various regulations to expound upon this basic protection.

In 2000 President Bill Clinton issued Executive Order 13166, "Improving Access to Services for Persons with Limited English Proficiency." This executive order requires federal agencies to examine the services they provide, identify any need for services to those with limited English proficiency (LEP), and develop and implement a system to provide those services so LEP persons can have meaningful access to them. Thus, Title VI protections were offered to persons who do not speak English well.

The U.S. Department of Justice has issued a Policy Guidance Document, "Enforcement of Title VI of the Civil Rights Act of 1964—National Origin Discrimination Against Persons with Limited English Proficiency (LEP Guidance)." This LEP Guidance sets forth the compliance standards that recipients of federal financial assistance must follow to ensure that their programs and activities normally provided in English are accessible to LEP persons and thus do not discriminate on the basis of national origin in violation of Title VI's prohibition against national-origin discrimination, and that they comply with Executive Order 13166. Such detailed standards include access to interpretation services and translation of documents.

Conservative members of Congress have criticized Clinton's executive order out of fear that there will be high costs associated with making government accessible to everyone. They have asked Department of Justice to request each agency to detail how it is complying with the Clinton order and to justify its cost. The DoJ is also offering the public an opportunity to comment on the relative costs and benefits of allowing accessibility in government. Please sign and send the enclosed letter to the Office of Civil Rights, letting them know that you support government access to persons who cannot speak English well.



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# March Legislative Update

On February 22 legislators passed an important deadline. No new bills can be introduced after that date. That having been said, legislators have been known to strip a current bill of all its wording in order to make an entirely new bill of one that was introduced before the deadline. In fact, they can introduce a bill after February 22.

Here are the bills we are currently monitoring

### *HIV/AIDS Issues*

**AB 925** (Dion Aroner, D–Berkeley)
**Purpose:** To make several changes to the laws surrounding the California Working Disabled Program (CWD). Among other changes, it would allow working disabled people to earn up to 450 percent of the federal poverty level to buy into Medi-Cal health insurance.
**Status:** Has passed the Assembly and all necessary Senate committees. Is awaiting a final vote on the Senate floor while the author seeks the governor's support of the bill.
**LLP Position:** Support.

**AB 1423** (Helen Thomson, D–Davis)
**Purpose:** To include licensed marriage and family therapist services, and clinical social worker services, within the scope of Medi-Cal–covered benefits to the extent that federal matching funds are available, including home- and community-based services approved by the Department of Health and Human Services, for beneficiaries with a diagnosis of AIDS (or ARC) who require intermediate care or a higher-level of care.
**Status:** Approved by the Assembly and sent to the Senate Health and Human Services Committee. The author has not decided yet whether to pursue the bill. If she does it will not come up for a vote in committee until May or June.
**LLP Position:** Support.

**AB 1763** (Keith Richman, R–Granada Hills)
**Purpose:** To allow the governor to declare a health state of emergency under certain circumstances, including those resulting from a terrorist attack. Specifically states that "public health emergency" does not include an occurrence or imminent threat of human immunodeficiency virus (HIV). Would establish agencies and procedures for dealing with potential health emergencies, for their declaration and termination.
**Status:** Referred to the Assembly Health and Assembly Governmental Organization Committees. Will be heard in Assembly Health first, probably in mid- to late-March.
**LLP Position**: Neutral as long as it states that HIV will not cause the governor to declare a state of emergency.

**AB 1853** (Paul Koretz, D–West Hollywood)
**Purpose:** To require insurance companies to provide more adequate payment to donors who treat people with HIV/AIDS.
**Status:** Introduced. Referred to the Assembly Health Committee. No hearing date set yet.
**LLP Position:** Support.

**SB 187** (John Vasconcellos, D–Santa Clara)
**Purpose:** To require the State Department of Health to establish and maintain a voluntary program for the issuance of registry identification cards to qualified medical marijuana patients, and to establish procedures under which a patient with the card could use marijuana for medical purposes. *Note:* A recent US Supreme Court decision stated that, in spite of Proposition 215, a person may be prosecuted under federal law for possession of marijuana. The court said medical necessity does not justify possession. So signing up for a marijuana registry card may be signing a confession to violation of federal law.
**Status:** Left on the Senate floor while Senator Vasconcellos seeks to persuade the governor to sign it.
**LLP Position:** Oppose.

**SB 492** (Richard Polanco, D–Los Angeles)
**Purpose:** To require the Department of Health Services to request federal waivers so that foreign medical

*Continued on page 7*

## *See Copies of State Bills*

**View any state bill listed here by going to the Lambda Letters Project Web site!
Go to www.lambdaletters.org and click on the Legislative Update button. Click on the bill number you're interested in and choose "HTML" to view it.**

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graduates now in the U.S. serving certain designated "health shortage areas" can remain here in the U.S. The waivers would focus on physicians who serve Medicare, Medi-Cal, low-income, and uninsured clients. It would ensure that foreign medical graduates who are serving patients with HIV or AIDS can remain here in the United States. Some of them, under their current visas, must soon return to their native country for two years.
**Status:** Has passed the Senate and all necessary Assembly committees. Is currently in the Assembly inactive file.
**LLP Position:** Support.

**SB 599** (Wes Chesbro, D–Santa Rosa)
**Purpose:** To require health plans to cover medically necessary substance-related disorders in the same way that plans cover any other medical condition. The only limit that may be placed on the coverage is a 60-day annual limit on non-hospital residential care. The bill would also require health plans to offer coverage for the treatment of alcoholism.
**Status:** Passed the Senate and all necessary Assembly Committees. Is in the Assembly Inactive file pending the author's decision on what to do with it. It's strongly opposed by the insurance industry. The author plans to move the bill in 2002, although he would not have to move it until the end of the year. A deal may be cut to mandate only the substance-abuse related benefits covered by CalPERS, the healthcare program for state workers. That program has some limits.
**LLP Position:** Support.

**SB 1315** (Byron Sher, D–Redwood City)
**Purpose:** To reduce prescription drug costs by establishing a multi-agency prescription drug buying pool in state government. By buying in bulk, the central purchaser may be able to lower the per-unit cost of the drugs. The central purchaser would buy drugs for other state agencies unless those agencies can get the drugs cheaper. Private entities, such as employer and employee groups and private pharmacies, would be permitted to contract with the buying pool in order to lower their prescription drug costs. Any entity now permitted to buy drugs could do so through the buying pool.
**Status:** Assigned to the Senate Health and Human Services Committee for a hearing on March 6.
**LLP Position:** Support.

## *Lesbian/Gay/Bisexual/Transgender Issues*

**AB 1649** (Jackie Goldberg, D–Los Angeles)
**Purpose:** To amend California's Fair Employment and Housing Act to ban employment and housing discrimination against transgendered people.
**Status:** Approved by the Assembly and the Senate Judiciary Committee. The bill may be taken up again this year. If so, it will start where it left off last year. Its first committee would be the Senate Appropriations Committee. The bill was dropped last year by the author at the request of the governor. He promised Goldberg that he'd fulfill most of the bill's purpose through new procedures at the Department of Fair Employment and Housing. The department has created new procedures. They are awaiting final approval from the governor.
**LLP Position:** Support. We are cosponsors of the bill.

**AB 1885** (Carol Liu, D–Pasadena)
**Purpose:** To allow for a tax credit on the premium for continuing group health insurance if a person loses employer-provided group health insurance as a result of being laid of or being given reduced work hours by the employer. The tax credit would cover the premium for the insured and his or her spouse, domestic partner, and dependent children.
**Status:** Referred to the Assembly Revenue and Tax Committee. No hearing date set yet.
**LLP Position:** Support.

**AB 1908** (Rebecca Cohn, D–Campbell)
**Purpose:** To allow employer-paid, long-term care insurance to state employees and retirees enrolled in the public employee retirement system. Would also allow this insurance for their spouses, parents, and spouses' parents. Would allow employer-paid, long-term care insurance to employees and retirees of certain local governments and to their spouses and parents.

*Continued on page 8*

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**Status:** Probably will be assigned to the Public Employees, Retirement, and Social Security Committee. No hearing date set yet.
**LLP Position:** Support if domestic partners and the parents of domestic partners are added to the bill.

**SB 1280** (Ray Haynes, R–Riverside)
**Purpose:** To allow churches and religious organizations to receive state and local government funds to carry out public social services. Includes safeguards against use of the funds to promote religion. Unfortunately those safeguards may not be sufficient. The funds may enhance some churches' ability to oppose gay rights and a woman's right to choose.
**Status:** Assigned to Senate Health and Human Services Committee. May be heard March 6 or 13.
**LLP Position:** Oppose.

## *People of Color Issues*

**AB 5** (Thomas Calderon, D–Montebello)
**Purpose:** To prohibit an insurer from refusing to issue or renew insurance on a private passenger car solely on the basis of a consumer credit report.
**Status:** Approved by the Assembly and sent to the Senate Insurance Committee. The author plans to move the bill, but it may not be heard in committee until May or June.
**LLP Position:** Support.

**AB 14** (Jackie Goldberg, D–Los Angeles)
**Purpose:** To state the intent of the Legislature to examine the state school facilities program to ensure that allocation formulas reflect the current and future needs for public kindergarten to 12th grade and to examine and assess the needs of the higher educational system, including funding distributions.
**Status:** Approved by the Assembly and Senate. Assembly refused to concur with changes made in the Senate. Is in a two-house conference committee.
**LLP Position:** Neutral.

**AB 32** (Keith Richman, R–Chatsworth)
**Purpose:** To create the Cal-Health program, which would provide coordination of the Healthy Families and Medi-Cal programs. The bill would authorize providers to screen and temporarily enroll individuals in Medi-Cal and the Healthy Families Program at the time the person is provided with medical care, and would require full reimbursement of the provider for services covered under those programs. The bill would require licensed hospitals, clinics, and other health facilities to inform individuals about Cal-Health and, in the case of urgent or emergency services, the bill would require that individuals be informed about the program and given an opportunity to apply after services have been rendered. The bill would expand eligibility under the Medi-Cal program to adults with family incomes at or below 250 percent of the federal poverty level, and would require the state to apply to the federal government for waivers to allow federal funds to be used in that regard.
**Status:** Held in the Senate Appropriations Committee. No word yet on the author's plans for the bill.
**LLP Position:** Support.

**AB 42** (Howard Wayne, D–San Diego)
**Purpose:** To establish a state-funded colorectal cancer screening program to be provided to uninsured or underinsured persons over the age of 50 and with incomes at or below 200 percent of the federal poverty level.
**Status:** Held in the Senate Inactive file. Author will move the bill once he has enough votes to approve the bill
**LLP Position:** Support.

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**AB 108** (Virginia Strom-Martin, D–Duncan Mills)
**Purpose:** To make it easier for California to recruit more qualified pharmacists from within California and from other states as well.
**Status:** Was Approved by the Assembly Health Committee and the Assembly Appropriations Committee. Dropped by the author. She didn't like the compromises needed to get the bill moving.
**LLP Position:** Support.

**AB 1743** (John Campbell, R–Irvine)
**Purpose:** To authorize tax credits for the start-up costs of employee pension programs offered by small employers. Would increase the annual amount that can be contributed to Educational Individual Retirement Accounts from the current limit of $500 to a new limit of $2,000 per year. These features could benefit the many minorities and women working for small employers.
**Status:** Referred to the Assembly Revenue and Tax Committee for a hearing on February 19. The bill was held in committee while committee members review recent amendments to the bill. New hearing date not set yet.
**LLP Position:** Support.

**AB 1749** (John Longville, D–San Bernardino)
**Purpose:** Would require the governor to proclaim the third Saturday in June each year as "Juneteenth National Freedom Day: A Day of Observance," and would urge the people of California to join in celebrating this day to honor and reflect on the significant role that African Americans have played in the history of the United States and how they have enriched society through their steadfast commitment to promoting brotherhood and equality.
**Status:** Referred to the Assembly Governmental Organization Committee. No hearing date set yet.
**LLP Position:** Support.

**AB 1751** (Elaine Alquist, D–Santa Clara)
**Purpose:** To require high schools to offer courses of study relating to the economics of higher education and instruction on completing forms relating to student financial aid.
**Status:** Referred to the Assembly Education Committee. No hearing date set yet.
**LLP Position:** Support.

**AB 1788** (Sarah Reyes, D–Fresno)
**Purpose:** To make it easier for California to recruit more qualified pharmacists from within California and from other states as well. Similar to AB 108.
**Status:** Referred to the Assembly Health Committee. No hearing date set yet.
**LLP Position:** Support.

**AB 1806** (Keith Richman, R–Granada Hills)
**Purpose:** To require the state to increase participation in Medi-Cal by maximizing to the fullest extent possible the amount of income and resources that medically needy individuals are allowed to retain for purposes of Medi-Cal eligibility. The bill would specify that its provisions would be implemented only to the extent that federal financial participation is available.
**Status:** Referred to Assembly Health Committee. No hearing date set yet.
**LLP Position:** Support.

**AB 1807** (Keith Richman, R–Granada Hills)
**Purpose:** To require the department to develop a form for the temporary qualification and accelerated enrollment of a child in the Healthy Families Program and the Medi-Cal program. The bill would require that a healthcare provider, as defined, be reimbursed for services, and a pharmacy be reimbursed for prescribed drugs, provided to a temporarily qualified child under these provisions to the same extent and in the same manner as a healthcare provider or pharmacy providing services to a child who is fully enrolled and eligible for benefits under the Healthy Families Program or the Medi-Cal program.
**Status:** Referred to Assembly Health Committee. No hearing date set yet.
**LLP Position:** Support.

**AB 1891** (Manny Diaz, D–San Jose)
**Purpose:** To require the Department of Housing and Community Development to establish a program to make matching grants, from money appropriated by the Legislature, to local agencies that have housing trust funds, to provide financing for affordable housing to be occupied primarily by low- and very-low-income persons and families. The bill would become operative only if the Housing Bond Act of 2002, as proposed by Senate Bill 1227, is enacted by the voters.

*Continued on page 10*

**Status:** Referred to Assembly Committee on Housing and Community Development. No hearing set yet.
**LLP Position:** Support.

**SB 183** (John Burton, D–San Francisco)
**Purpose:** To create a security deposit guarantee program that requires local governments to award security deposit guarantee certificates to qualified households to guarantee the payment of damages on a security deposit required by a landlord. The bill would assist lower-income tenants who are unable to pay the security deposit plus first month's rent.
**Status:** Approved by the Senate and the Assembly policy committee. Currently in the Assembly Appropriations Committee. No hearing date set yet. Funding of the bill may be dependent on passage of a bond measure this coming fall.
**LLP Position:** Support.

**SB 1264** (Dede Alpert, D–San Diego)
**Purpose:** Existing law provides for the California Work Opportunity and Responsibility to Kids (CalWORKs) program, under which each county provides cash assistance and other benefits to qualified low-income families. Certain types of payments received by recipients of aid under the CalWORKs program are prohibited from being treated as income or resources of the family and from being deducted from the amount of aid to which the family would otherwise be entitled. This bill says that any award or scholarship provided by a public or private entity to, or on behalf of, a dependent child based on the child's academic or extracurricular achievement or participation in a scholastic, educational, or extracurricular competition may not be treated as income or resources of the family for purposes of determining eligibility under the CalWORKs program.
**Status:** Referred to the Senate Health and Human Services Committee for a hearing on March 6.
**LLP Position:** Support.

### *Women's Issues*

**AB 130** (Tony Cardenas, D–Sylmar)
**Purpose:** To expand and reorganize a state-funded family-planning program to make it a comprehensive preventive and health screening program for low-income women under 65. Would provide funding for family-planning services, but specifically excludes funding for abortion-related services or advice. Current law already prohibits spending for abortions and this


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law already prohibits spending for abortions and this law leaves that provision unchanged.
**Status:** Approved by the Assembly and sent to the Senate Health and Human Services Committee. Author has not decided whether to move the bill. Even if she does the bill would probably not be voted on in committee until May or June.
**LLP Position:** Support with reservations about the abortion issue.

**AB 1860** (Carole Migden, D–San Francisco)
**Purpose:** To provide a female victim of sexual assault with counseling regarding the risk of pregnancy and the options for postcoital contraception. Emergency contraception shall be dispensed upon the request of the victim.
**Status:** Referred to Assembly Public Safety Committee. No hearing date set yet.
**LLP Position:** Support.

**AB 1896** (Carol Liu, D–Pasadena)
**Purpose:** To require a healthcare service plan and a disability insurer to provide coverage for a CA-125 blood test, a transvaginal sonogram, and a rectovaginal pelvic examination for a woman considered at risk for ovarian cancer.
**Status:** Referred to Assembly Health Committee. No hearing date set yet.
**LLP Position:** Support.

**AB 1909** (Rebecca Cohn, D–Campbell)
**Purpose:** To require—subject to adequate, discretionary funding from a city or county—that the superior courts in San Diego County, in Santa Clara County, and in any other county willing to participate, develop a demonstration project to identify the best practices that will allow judges in civil and criminal cases involving domestic violence to access the most current information possible regarding acts of domestic violence involving an individual and any action taken by the courts in this regard. The bill would require superior courts participating in this demonstration project to report their findings and recommendations to the Judicial Council and the Legislature.
**Status:** Probably will be referred to the Assembly Judiciary Committee. No hearing date set yet.
**LLP Position:** Support.

**AB 1915** (Alan Lowenthal, D–Long Beach)
**Purpose:** To require the Department of Motor Vehicles to provide a new set of license plates within 24 hours of an application from a registered owner who turns in the issued plates, and who provides proof of vehicle ownership, evidence of victimization by a domestic abuser, and evidence of efforts to get assistance in regard to the domestic abuse.
**Status:** Not referred to a committee yet. No hearing date set yet.
**LLP Position:** Support.

**SB 224** (Jackie Speier, D–San Mateo)
**Purpose:** To require the department of Health Services to submit a state plan amendment to the federal Health Care Financing Administration adopting the optional "categorically needy" eligibility group described in the federal Breast and Cervical Cancer Prevention and Treatment Act of 2000, thereby providing breast and cervical cancer treatment under the Medi-Cal program, subject to federal financial participation. The optional "categorically needy" described in the federal bill are low-income people being given cancer treatment, paid for by the state, but whose circumstances do not allow the state to request matching federal funds to help cover the cost of the treatment. Most of what the bill wanted was accomplished through the budget bill last year.
**Status:** Currently in the Assembly Appropriations Committee. Author is letting the bill sit. She may reactivate it if any fine-tuning of what was enacted last year is needed.
**LLP Position:** Support.

**SB 390** (Martha Escutia, D–Norwalk)
**Purpose:** To require the State Department of Education to develop a state master plan for childcare and development in consultation and collaboration with an oversight task force.
**Status:** Referred to the Assembly Appropriations Committee. No hearing date set yet.

*Continued on page 12*

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**LLP Position:** Support.

**SB 564** (Jackie Speier, D–San Mateo)
**Purpose:** To require applicants for licensure as a psychologist; marriage, family, and child counselor; or social worker who began graduate study on or after January 1, 2004, to complete a minimum of 15 contact hours of course work in spousal or partner abuse assessment, detection, and intervention strategies. Those who were licensed earlier than that date would be required to take continuing education courses in the above subjects.
**Status:** Passed the Senate. Not assigned to an Assembly Committee yet.
**LLP Position:** Support.

**SB 622** (Deborah Ortiz, D–Sacramento)
**Purpose:** To allow the Women, Infants, and Children (WIC) supplemental nutrition branch of the State Department of Health Services to issue grants to local entities to provide certain dental services and information.
**Status:** Approved by the Senate and sent to the Assembly Human Services Committee for a hearing on June 26. Hearing cancelled at author's request. The author has not decided whether to move the bill. The state's budget woes are a problem.
**LLP Position:** Support.

**SB 993** (Liz Figueroa, D–Fremont)
**Purpose:** To increase the amount of money paid by the state to childcare centers for the cost of caring for low-income children.
**Status:** Currently in the Assembly Human Services Committee. It has been stopped by the state's budget problems. The bill may be rewritten to serve another purpose of use to women.
**LLP Position:** Neutral pending word of the bill's new purpose.

**SB 1291** (Ray Haynes, R–Riverside)
**Purpose:** To require the state to issue special auto license plates that say "Choose Life." All proceeds from the license plates would go to non-governmental agencies that provide counseling and other services that meet the needs of pregnant women who are committed to placing their newborn children for adoption. Funds could not go to any agency that is associated with abortion activities, counseling for or referrals to abortion clinics, providing procedures related to medical abortions, or pro-abortion advertising.
**Status:** Referred to Senate Transportation Committee. No hearing date set yet.
**LLP Position:** Oppose.

**SB 1301** (Sheila Kuehl, D–Los Angeles)
**Purpose:** Current law states that prior to the performance of an abortion, a medical committee must determine that continuation of the pregnancy would impair the physical or mental health of the mother, or that the pregnancy resulted from rape or incest. This law instead states that every person has the right to (a) choose or refuse birth control and (b) to choose to bear a child or obtain an abortion. The bill says the state shall not deny a woman's right to obtain an abortion unless the procedure is to be performed or assisted by one not properly licensed by the state or unless the attending physician thinks the baby could live outside the uterus *and* the doctor believes the abortion is not needed to protect the life and health of the mother.
**Status:** Referred to Senate Judiciary Committee. No hearing date set yet.
**LLP** Position: Support.

**SB 1320** (Sheila Kuehl, D–Los Angeles)
**Purpose:** Current law prohibits stalking or harassment. A criminal charge of such behavior must be supported by evidence of a pattern of conduct. This law says any conduct, alone or in combination with stated or written threats, may provide evidence of a credible, and illegal, threat, as long as other existing legal requirements are met.
**Status:** Referred to the Senate Public Safety Committee. No hearing date set yet.
**LLP Position:** Support.

**SB 1365** (Jackie Speier, D–San Mateo)
**Purpose:** Current law allows taxpayers, until January 2003, to include an extra payment with their state income tax return and to designate that extra money to be used to support breast cancer research. This bill would extend the program until January 2008.
**Status:** Double referred to the Senate Committee on Revenue and Tax and the Senate Education Committee. No hearing date set yet.
**LLP Position:** Support.

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## LGBT Issue

*Continued from page 3*

AB 1885 would provide at least a partial solution to this problem. It would grant people a tax credit on the out-of-pocket premium for continuing group health-care insurance when the person has been laid off or put on reduced work hours. The tax credit would cover the cost of insurance for the employee, for his or her spouse or domestic partner, and for their children.

Because many in our community are living with HIV/AIDS, the costs of treatment and medications are expensive. Indeed, care for most health problems can be costly. Group health plans have done much to make good medical care affordable. Therefore it is important to help people continue receiving coverage through their group plan even if they are laid off or placed on reduced hours. AB 1885 attempts to make continued health coverage affordable. We think it deserves your support.

Please write to the members of the Assembly Revenue and Tax Committee. Urge them to support AB 1885.

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## HIV/AIDS Issue

*Continued from page 3*

to cover the doctor's costs of caring for the patients (such as those with HIV/AIDS) who do need expensive care.

This system penalizes HIV/AIDS patients in two ways. First, HIV is concentrated in certain geographic areas, so doctors in those areas naturally receive more HIV/AIDS patients who need expensive care. Several doctors and doctor networks have actually gone out of business because of this. Second, because there is such a financial disincentive, few providers want a reputation for excellence in HIV/AIDS care. If they are losing money on their current HIV-positive patients, they don't want to attract more such patients. The result is that, care is not often what it should be. AB 1853 will rectify this problem by ensuring that doctors get paid a rate that covers the cost of care for HIV/AIDS patients.

AB 1853 is a good bill and we hope you will write to the members of the Assembly Health Committee urging them to vote for it.

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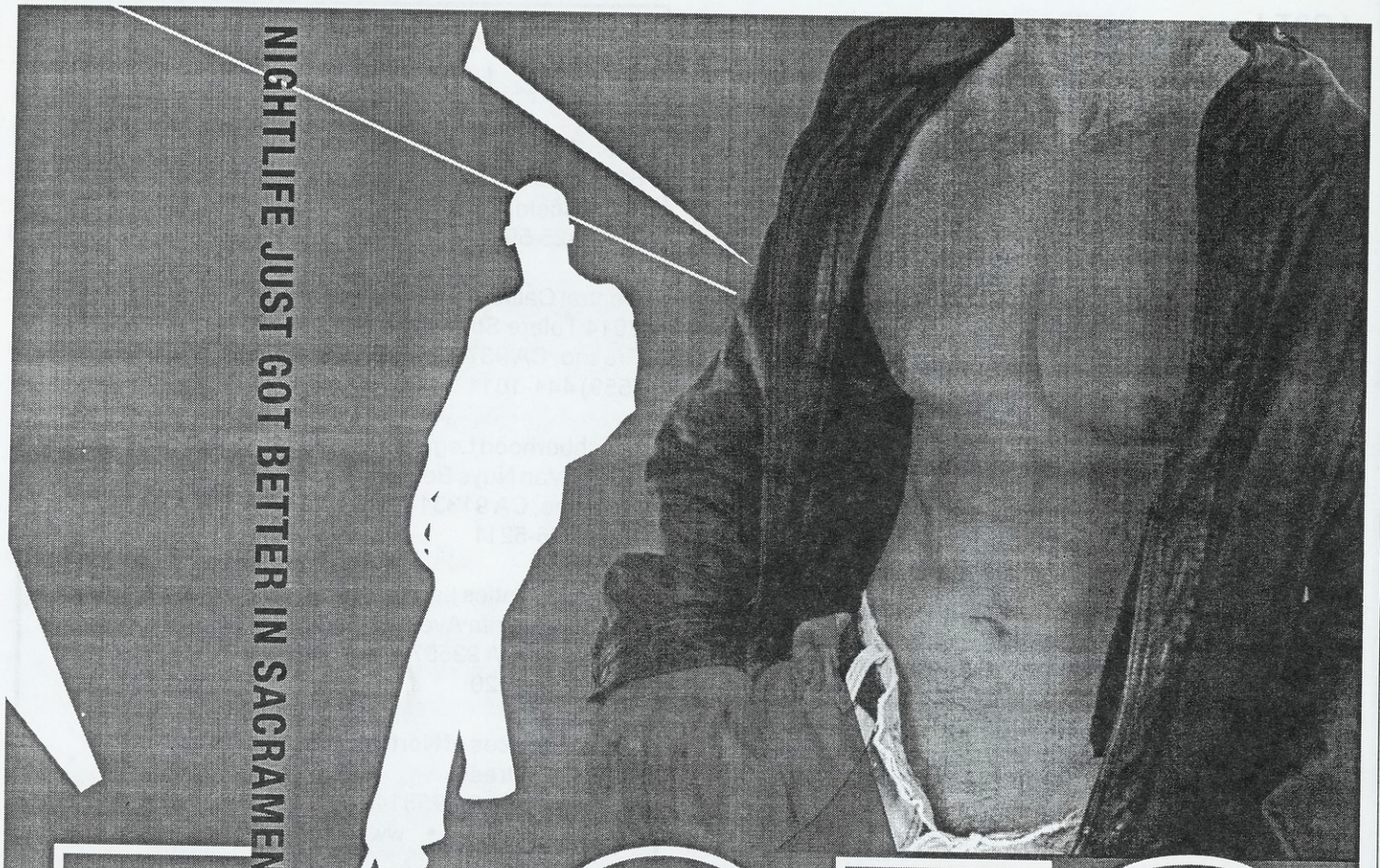

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